

PROGRAM OVERVIEW:

This is a six day camp used to introduce students interested in going into law enforcement or a branch of the armed forces. Cadets march in platoon formation and participate in a drill competition. The program includes physical training, forensics, canine, crime codes, SERT team, rock climbing, drug laws, radar, marksman course, and familiarity with weapons. **You should be physically fit, in good health,** and have a good academic record to be able to participate. **THIS IS NOT A RECREATIONAL CAMP.**

ELIGIBILITY:

Any female or male student who is between the ages of 15 -17 prior to entering the camp on June 11th. Must be a resident of Pennsylvania.

COST:

Fee of \$175.00* includes meals and lodging. The fee is paid by the sponsoring post/unit or other civic group, and **IS NON-REFUNDABLE.**

TRANSPORTATION:

The responsibility of the sponsoring group or the parents of the student.

AWARDS:

SCOTT BALL OUTSTANDING CADET MEMORIAL AWARD

For the cadet who shows best merit; winner receives an American Legion plaque and \$1000.00 towards a degree in law enforcement or enters the military.

ELMER HAFFER ESSAY AWARD

For the best essay; winner will receive a plaque and a \$1000.00 scholarship.

WILLIAM EVANS LEADERSHIP AWARD

For the cadet who shows the best leadership ability; winner receives a plaque and \$1000.00



To get an application or if you have any questions, contact

THE AMERICAN LEGION
DEPARTMENT OF PENNSYLVANIA
AT 717-730-9100 or
www.pa-legion.com

*price subject to change

PENNSYLVANIA STATE POLICE YOUTH WEEK

JUNE 9-15, 2019

AT YORK COLLEGE OF
PENNSYLVANIA
IN
YORK, PENNSYLVANIA

SPONSORED BY
THE AMERICAN LEGION
AND
THE PENNSYLVANIA
STATE POLICE
AND
PA NATIONAL GUARD
FOR THE
49TH YEAR



PENNSYLVANIA
NATIONAL GUARD 

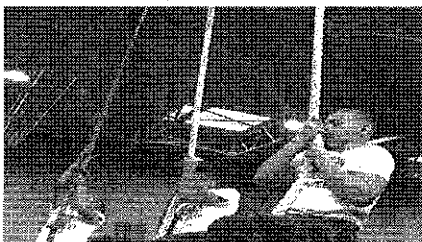
STATE POLICE

YOUTH WEEK was established in 1970 to increase understanding among the state's youth and its law enforcement. The objective is to give the cadets the chance to see and experience firsthand many areas of law enforcement, which includes leadership, discipline, and self-esteem.



MISSION:

SPYW wants to prepare the cadets thru moral, intellectual and physical aspects to become future leaders of the Commonwealth and instill in them courage, honor, and commitment.



DO THEY LIKE IT?

CADETS WRITE:

"They taught us discipline and to work together as one, so we could achieve our goals. The desire to accomplish and succeed was always there."

"Thank you for letting me have the opportunity and the experience of being able to attend the Camp. It has been a rewarding experience!"

PARENTS WRITE:

"He hasn't stopped talking about it yet. Seldom does he show this much enthusiasm over anything...what a wonderful program it was, and what an impression it made on a 15-year-old-boy."

"He has yet to cease talking and has truly been affected in the most positive way...We're very proud of his new-found maturity and the respect he has for all of you. A job well done!!!"

FIELD TRIPS:

FIRING RANGE where the cadets are taught by certified NRA instructors.

SKI ROUNDTOP ROPES COURSE to learn team building skills.

PSP TRAINING ACADEMY to see what training the troopers really go through.

FT. INDIANTOWN GAP to give the cadets a glimpse of what happens in the military.



DAILY OVERVIEW:

0530-0610 - MORNING RUN
0615-0655 - CLEAN/INSPECTION
0700-0740 - BREAKFAST
0750 - COLORS
0800-1150 - INSTRUCTION
1200-1250 - NOON MEAL
1300-1650 - INSTRUCTION
1700-1750 - EVENING MEAL
1800 - RETREAT
1810-2050 - INSTRUCTION
2100-2150 - CADETS TIME
2200 - CALL TO QUARTERS
2215 - LIGHTS OUT





Pennsylvania American Legion - State Police Youth Week Camp

Sponsored by the Pennsylvania American Legion
Pennsylvania State Police and the National Guard



JUNE 9-15, 2019

ELIGIBILITY

This is a premiere camp for young men and women, and, as such, potential Cadets must be between the ages of 15 and 17 prior to entering the camp on June 9th and be a Pennsylvania resident. The Post or District Commander or his/her representative will interview each Cadet nominated to select candidates and their alternates. Cadets must be in good health with no physical deficiencies, have an average or above average standing in their class, and express a personal interest in either law enforcement or military service. Applicants are chosen until the camp is full. Those who had applied the previous year and were not selected because of the large number of applicants will be considered first as long as they still meet the requirements.

Students who previously attended SPYW are not eligible to attend again as a cadet.

This program is not a recreational camp nor is it a disciplinary camp for problem youths. It is a rigorous camp that will test your physical and mental capabilities. Please encourage your student to attend. However, if their desire is to not attend, do not force them since this will only hamper our efforts to host the best camp possible.

TRAINING

Cadets participate in a wide variety of instructional sessions with the state police and National Guard. They will learn how to work as a team and be taught self-discipline, self-esteem, and leadership. Remember, these are the future leaders of the Commonwealth and the Nation. Cadets will learn about and get hands-on exposure to military discipline and both military and law enforcement service. Recreational activities will be scheduled as time permits.

SPONSORSHIP

Applications are to be taken to your local American Legion Post, District, Auxiliary Unit, or any civic group who may sponsor you and pay the \$175 fee. **To obtain sponsorship from your local American Legion Post you must forward the post your completed application BY MAY 15TH**, to give some posts time to vote on the sponsorship request at their monthly meetings.

BEFORE SENDING IN APPLICATION MAKE SURE OF THE FOLLOWING:

1. COMPLETED APPLICATION - ALL 3 PAGES COMPLETED AND SIGNED.
 - A. MEDICAL FORM SIGNED BY PHYSICIAN NO EARLIER THAN FEBRUARY 1st OF CURRENT YEAR.
 - B. COPY OF MEDICAL INSURANCE CARD ATTACHED.
 - C. SMALL PICTURE ATTACHED.

MAIL ALL OF THE ABOVE TO THE SPONSORING LEGION POST, ATTN: POST ADJUTANT

DEADLINE TO SUBMIT APPLICATIONS TO SPONSORING POST IS MAY 15, 2019.

DIRECTIONS FOR LEGION POSTS

Please mail the completed application and check for the tuition fee in the amount of **\$175.00** (made payable to PA American Legion), to Pennsylvania American Legion, Attn: Pennsylvania American Legion- State Police Youth Week Camp, PO Box 2324, Harrisburg, Pa. 17105-2324.

DEADLINE TO SUBMIT ALL REQUIRED DOCUMENTS TO LEGION HEADQUARTERS IS MAY 31, 2019

APPLICATION

Print Legibly or TYPE

Application must be returned no later than May 15, 2019 to sponsoring Legion Post.

Name: _____ Gender: _____
Last First MI

Date of Birth: ____/____/____ Age ____ Height: ____ Weight: ____ Eye Color: ____ Hair Color: ____

Address: _____
Street/Road City State Zip

School Grade Completed June 2019 _____ Shirt Size: _____

Telephone (____)-____-____ E-Mail: _____

WELCOME PACKET will be emailed-- check inbox & spam folders

School Name: _____

Sponsoring Organization: _____ Post # _____ District _____

Post/Organization Contact Person: _____ Phone: (____)-____-____

Applicant's Signature _____

Date _____

Have you applied before? ☐ YES ☐ NO Have applied in the past but was never accepted? ☐ YES ☐ NO

PARENT / GUARDIAN RELEASE and PERMISSION to PHOTOGRAPH, VIDEO TAPE AND OR INTERVIEWED

In consideration of instruction and training to be given to _____ (son/daughter) as a citizen of The Pennsylvania American Legion-State Police-National Guard Youth Week Camp to be held June 9-15, 2019, at York College of Pennsylvania, York, Pennsylvania. I hereby give consent for him/her to participate fully in all planned activities, as well as participate in any field trip, which might be scheduled as part of the program.

We release and discharge the Pennsylvania American Legion-State Police-National Guard Youth Week Camp, its officers, staff and counselors from any and all claims, demands, damages, suits, actions, or causes of action which we may, can or shall have by _____ (son/daughter) while in attendance at the Pennsylvania American Legion-State Police-National Guard Youth Week Camp no matter how caused or occasioned, including travel to and from home to camp.

It is further understood that the program is physically and mentally challenging, requiring that they be physically fit and in good academic standing and said son/daughter does not require individual or special attention and that he/she will participate in all phases of the program.

☐ I give permission ☐ I do not give permission for _____ to be photographed, video taped and or interviewed during participation in the Pennsylvania American Legion-State Police-National Guard Youth Week Camp Program June 9-15, 2019. I understand the photos, video tape and or interview will be used by the Pennsylvania American Legion to promote the program in future years.

A RECENT LEGIBLE PHOTOGRAPH OF THE APPLICANT MUST BE ATTACHED TO THE APPLICATION.

Signature of Parent / Guardian

Date

MEDICAL FORM

Applicants Name _____
Last First MI

Address: _____
Street City State Zip Code

PHYSICIAN'S EVALUATION AND EMERGENCY MEDICAL INFORMATION

IMMUNIZATIONS: The last year shots were administered _____

Tetanus _____ Diphtheria _____ Polio _____ MMR _____ Pertussis _____

☐ Allergy to a medicine ☐ Allergy to a food ☐ Allergy to a plant ☐ Allergy to insect bites ☐ Epilepsy ☐ Lung condition

☐ Hepatitis ☐ High Blood Pressure ☐ Asthma ☐ Convulsions ☐ Heart condition ☐ Diabetes ☐ Fainting Spells

☐ Bleeding Disorders ☐ Hypertension ☐ Other _____

Explain _____

Medicine: My child may receive, if needed: _____ Tylenol _____ Tums _____ Advil _____ Triple Antibiotic Ointment _____ Caladryl _____ Benadryl or Benadryl Cream _____
(Parent or Guardian please Initial)

Does applicant take medicine daily or have special care? ☐ No ☐ Yes

If yes, please explain and list all prescription drugs: _____

Is there any health related information that the staff should be aware of? _____

Approved for participation in: ☐ Water activities ☐ Competitive sports ☐ Other activities ☐ Rigorous exercise

Specify exceptions: _____

Signed _____ Date _____
(Physician)

PLEASE ATTACH A COPY OF STUDENT'S CURRENT HEALTH INSURANCE CARD

The medical form must be completed, signed, and dated by a physician, and returned **NO EARLIER THAN FEBRUARY 1ST of current year.** If the form is not returned within the specified period, your child may not be accepted into the program.

EMERGENCY NOTIFICATION:

Name: _____ Relationship: _____

Home Phone: _____ Business Phone: _____ Cell: _____

Personal Physician: _____ Phone: _____

PARENTAL CONSENT TO MEDICAL TREATMENT AND HOSPITAL SERVICES:

This will certify that we (I), the undersigned parent(s) or guardian(s) of _____ do, hereby consent and grant permission, should the necessity of medical care arise, to the furnishing of medical treatment and hospital services as ordered or recommended by a qualified attending physician, including the administration of an anesthetic, laboratory procedures, medical or surgical treatment, x-ray examination or other hospital services.

This will further certify that we (I), the undersigned, do hereby release and discharge the Pennsylvania American Legion-State Police-National Guard Youth Week Camp, its officers, agents, instructors and employees from any and all claims, demands, damages, suits, actions which we (I) may, can or shall have by reason of any illness, injury or accident incurred or suffered by said son/daughter while traveling to, attendance at or participation in the Pennsylvania American Legion - State Police- National Guard Youth Week Camp from the time of his/hers departure from home until his/hers return thereto.

Print name of Father or Guardian

Print name of Mother or Guardian

Signature of Father or Guardian

Date

Signature of Mother or Guardian

Date

Street

City

State

Zip Code

Alternate Contact Person: Phone #: _____

Relationship: _____

The Emergency Notification form must be signed by the father, mother or guardian(s), and attached to the Medical form.

There are times when a medical emergency may occur and medical service is required or prescriptions need to be filled, to speed the process along. Please attach a legible photo copy of all health/prescriptions cards to the rear of this form.

- As a requirement for your child to be accepted into the program all the forms **MUST BE FILLED OUT COMPLETELY** and returned with the required attachments.
- No application will be processed without the appropriate fee or medical forms, photo, or health insurance card.
- For more information, please call The Department of Pennsylvania American Legion, (717) 730-9100
- **THERE ARE NO SPECIAL DIET FACILITIES**